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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/527,831 Conf. #1014
	Filing Date	January 9, 2006
	First Named Inventor	Kathryn Nance North
	Art Unit	1634
	Examiner Name	Steven Pohnert
	Attorney Docket Number	2202530.125/GTI-013

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

23483

OR

Firm or
Individual Name

Address

City

Country

State

Zip

Telephone

Email

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>M. L. Ashdown</i>		
Name	M. L. ASHDOWN I.P. & LICENSING MANAGER GENETIC TECHNOLOGIES		
Date	17 October 2008	Telephone	861384127002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.